

Day Care Homes REIMBURSEMENT CLAIM CHECKLIST

This checklist was prepared for and is directed to sponsors' claim preparers to help them complete claims for reimbursement using the Actual Count Claiming Method.

Reporting

- () Item 1. Is a label affixed to the claim form? If no label is available, type or print the sponsor's agreement number, name, and address in the space provided in item 1.
- () 2. Is the month reported in item 2 the claim month, **not** the month the claim was prepared?
- () 3. Is the correct box in item 3 checked?
- () 6. Did you report operating days in the box provided to the far right of item 6?
- () 7. Did you report sites by tiering category? Sum across to equal total sites. **Remember, a sponsor may only claim reimbursement for meals served at approved sites.**
- () 8. Did you report your average daily participation by site tiering category? Sum across to equal total average daily participation. Round the average daily participation **up** to the nearest whole number? **Never round down for average daily participation.**
- () 9. Did you report the sponsor's enrollment by the correct tiering category as it relates to each tiering meal category? Remember to add together the Tier II High enrollment and the Tier II Mixed children approved for Tier I reimbursement. Likewise add the Tier II Low enrollment and the Tier II Mixed children approved for Tier II reimbursement. Sum across to equal total enrollment.
- () 10. Did you report meals by the correct meal type using the correct tiering meal category? Sum across to equal meal type totals.
- () 11. Did you report administrative expenses? Report whole dollars only.
- () 12. If state reimbursement is retained for administrative expenses, is it reported in item 12?

Audit Checks

- () The total sites reported cannot exceed the sum of Tier I, Tier II High, Tier II Low, and Tier II Mixed sites.
- () The **Tier I, Tier II High, Tier II Low, or total average daily participation** reported in item 8 cannot be greater than the **Tier I, Tier II High, Tier II Low, or Total Enrollment** reported in item 9.
- () The number of tiering breakfasts, lunches, **or** suppers reported cannot exceed the product of tiering enrollment type multiplied by operating days (*i.e., the number of Tier I breakfasts, lunches or suppers must be less than or equal to the product of Tier I enrollment multiplied by the Operating Days; likewise for Tier II High, Tier II Low, and total breakfasts, lunches or suppers*).

- () The number of tiering supplements reported cannot exceed two times the product of tiering enrollment multiplied by operating days (*i.e., Tier I enrollment multiplied by the operating days cannot exceed two times Tier I Supplements; likewise for Tier II High, Tier II Low and Total Supplements*).

Certification

- () Is there an **original** signature of an authorized official on the claim? **Carbon, stamped, or photocopied signatures will not be accepted.**

General

- () Is the claim typed or legibly printed?
- () Did you make a copy of the sponsor's claim to submit with the original? The copy may be a photocopy or carbon copy. Claims submitted without a copy will be returned unprocessed.